

APPLICATION DATA SHEET**Application Information**

Application Type::	Non-Provisional
Subject Matter::	Utility
Title::	Brain Computer Interface
Attorney Docket Number::	60005161-0061
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	13
Small Entity?::	Yes
Petition Included?::	No
Secrecy Order in Parent?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Eric
Middle Initial:	C.
Family Name::	Leuthardt
City of Residence::	St. Louis
Country of Residence::	US
Street of Mailing Address::	5561 Waterman Boulevard, Condo 1 West
City of Mailing Address::	St. Louis
State or Province of Mailing::	MO
Postal Code of Mailing Address::	63112

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Austrian
Status:: Full Capacity
Given Name:: Gerwin
Family Name:: Schalk
City of Residence:: Albany
Country of Residence:: US
Street of Mailing Address:: 149 Eagle Street
City of Mailing Address:: Albany
State or Province of Mailing:: NY
Postal Code of Mailing Address:: 12202

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Daniel
Middle Initial:: W.
Family Name:: Moran
City of Residence:: Ballwin
Country of Residence:: US
Street of Mailing Address:: 10 Arbor Hill Court
City of Mailing Address:: Ballwin
State or Province of Mailing:: MO
Postal Code of Mailing Address:: 63021

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jonathan
Middle Name:: Rickel
Family Name:: Wolpaw
City of Residence:: Delmar
Country of Residence:: US
Street of Mailing Address:: 11 Lyons Avenue
City of Mailing Address:: Delmar
State or Province of Mailing:: New York
Postal Code of Mailing Address:: 12054

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeffrey
Middle Initial:: G.
Family Name:: Ojemann
City of Residence:: Seattle
Country of Residence:: US
Street of Mailing Address:: 8245 45th Avenue NE
City of Mailing Address:: Seattle
State or Province of Mailing:: WA
Postal Code of Mailing Address:: 98115

Correspondence Information

Correspondence Customer Number:: 26263

Representative Information

Representative Customer Number:: 26263

Assignee Information

Assignee Name:: Washington University

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